

VILLAGE OF ELK RAPIDS

315 Bridge Street; P.O. Box 398
Elk Rapids, Michigan 49629

SIGN PERMIT APPLICATION

TO BE COMPLETED BY ZONING ADMINISTRATOR:

APPLICATION NUMBER: _____

APPLICATION FEE: \$30.00

DATE OF APPLICATION: _____

CHECK NUMBER: _____

TO BE COMPLETED BY APPLICANT:

(Attach additional pages if necessary)

PROPERTY INFORMATION:

Address _____

Parcel # 05-43- Lot # _____

Zoning District _____

OWNER INFORMATION:

Name _____

Address _____

Phone _____

APPLICANT INFORMATION: (If different from Owner)

Name _____

Address _____

Phone _____

TYPE & SIZE OF SIGN(S) PROPOSED (As defined in Village of Elk Rapids Zoning and Unified Development Code Chapter 162)

A: _____

B: _____

C: _____

APPROXIMATE VALUE EACH SIGN: _____

WILL SIGN(S) BE ILLUMINATED? Yes _____ NO _____

If yes, lighting shall comply with Section 162.13 of the Village of Elk Rapids Zoning and Unified Development Code and a detailed drawing of proposed lighting fixture(s) shall be provided prior to permit approval.

